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Bib Data Sheet

CONFIRMATION NO. 5409

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|-----------------------------|-----------------------------------|--------------|------------------------|------------------------------------|
| SERIAL NUMBER 09/769,665 | FILING DATE 01/24/2001 RULE | CLASS 704 | GROUP ART UNIT 2654 | ATTORNEY DOCKET NO. BVOCP009 |
|-----------------------------|-----------------------------------|--------------|------------------------|------------------------------------|

APPLICANTS

Mikael Berner, San Jose, CA;

Kevin Stone, Sunnyvale, CA;
Lisa Guerra, Los Altos, CA;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 04/30/2001

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|---------------------------------|---|----------|---------|--------|-------------|
| Foreign Priority claimed | <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR | SHEETS | TOTAL | INDEPENDENT |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY | DRAWING | CLAIMS | CLAIMS |
| Verified and Acknowledged | Examiner's Signature _____ Initials _____ | CA | 15 | 18 | 3 |

ADDRESS

28875
Zilka-Kotab, PC
P.O. BOX 721120
SAN JOSE , CA
95172-1120

TITLE

System, method and computer program product for supporting the delivery of localized content

| | | |
|-----------------|---|--|
| FILING FEE | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) |
| RECEIVED 355 | | |



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| SERIAL NUMBER 09/769,665 | FILING DATE 01/24/2001 RULE | CLASS 704 | GROUP ART UNIT 2641 2655 | ATTORNEY DOCKET NO. BVOCP009/44614 |
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

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GRANTED ** 04/30/2001

** SMALL ENTITY **

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| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | Examiner's Signature | Initials | | |

ADDRESS

24277

TITLE

System, method and computer program product for supporting the delivery of localized content

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| FILING FEE RECEIVED 355 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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TITLE

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